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<b>PATENT APPLICATION FEE DETERMINATION RECORD</b> Substitute for Form PTO-875						Application or Docket Number <span style="font-size: 1.2em;">09/806789</span>	
<b>CLAIMS AS FILED - PART I</b> (Column 1) (Column 2)							
FOR	NUMBER FILED	NUMBER EXTRA				SMALL ENTITY	OR OTHER THAN SMALL ENTITY
BASIC FEE (37 CFR 1.16(a))						RATE	FEE
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	•				\$ _____	OR
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	•				X \$ _____ =	OR
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						X \$ _____ =	OR
						+ \$ _____ =	OR
						TOTAL	OR TOTAL
* If the difference in column 1 is less than zero, enter "0" in column 2.							
<b>CLAIMS AS AMENDED - PART II</b> (Column 1) (Column 2) (Column 3)							
AMENDMENT A	11/23/05	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	94	Minus	141	=		
	Independent (37 CFR 1.16(b))	12	Minus	20	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	•	Minus	•	=		
	Independent (37 CFR 1.16(b))	•	Minus	•	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(c))	•	Minus	•	=		
	Independent (37 CFR 1.16(b))	•	Minus	•	=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.							

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective Date: October 1, 2000

09/806789

## CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	141 minus 20 =	121
INDEPENDENT CLAIMS	20 minus 3 =	17
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PAYMENT EXTRA
Total		Minus	**
Independent		Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PAYMENT EXTRA
Total		Minus	**
Independent		Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PAYMENT EXTRA
Total		Minus	**
Independent		Minus	***
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

\*\* If the highest number previously paid for is 0, the "S" SPACE is less than 20, enter "0"

\*\*\* If the highest number previously paid for is 0, the "C" SPACE is less than 20, enter "0"

The highest number previously paid for Total or Independent is the highest number to be used in the appropriate column

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	395
X5 9=	1089
X40=	680
+135=	
TOTAL	2114

RATE	FEE
BASIC FEE	
X5 16=	
X20=	
+270=	
TOTAL	

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X5 9=	
X40=	
+135=	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X5 16=	
X20=	
+270=	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X5 9=	
X40=	
+135=	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X5 16=	
X20=	
+270=	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X5 9=	
X40=	
+135=	
TOTAL ADD'L FEE	

RATE	ADDITIONAL FEE
X5 16=	
X20=	
+270=	
TOTAL ADD'L FEE	